| Notice of Allowability | Application No. | Applicant(s) | |
|---|--|--|----|
| | 10/775,204 | ROSEN ET AL. | |
| | Examiner | Art Unit | |
| | Robert A. Wax | 1653 | |
| The MAILING DATE of this communication appe All claims being allowable, PROSECUTION ON THE MERITS IS herewith (or previously mailed), a Notice of Allowance (PTOL-85) NOTICE OF ALLOWABILITY IS NOT A GRANT OF PATENT RI of the Office or upon petition by the applicant. See 37 CFR 1.313 | (OR REMAINS) CLOSED in this ap or other appropriate communication GHTS. This application is subject to | plication. If not included n will be mailed in due course. TH | |
| 1. \boxtimes This communication is responsive to <u>the request for RCE and the RCE and the request for RCE a</u> | and amendment filed December 15, | <u>2005</u> . | |
| 2. The allowed claim(s) is/are 22-78. | | • | |
| Acknowledgment is made of a claim for foreign priority una) | been received. been received in Application No | | ne |
| Applicant has THREE MONTHS FROM THE "MAILING DATE" noted below. Failure to timely comply will result in ABANDONM THIS THREE-MONTH PERIOD IS NOT EXTENDABLE. | | complying with the requirements | |
| 4. A SUBSTITUTE OATH OR DECLARATION must be submi | | | - |
| 5. CORRECTED DRAWINGS (as "replacement sheets") mus | t be submitted. | · | |
| (a) including changes required by the Notice of Draftspers | on's Patent Drawing Review (PTO- | .948) attached | |
| 1) ☐ hereto or 2) ☐ to Paper No./Mail Date | | | |
| (b) ☐ including changes required by the attached Examiner's Paper No./Mail Date | s Amendment / Comment or in the C | Office action of | |
| Identifying indicia such as the application number (see 37 CFR 1. each sheet. Replacement sheet(s) should be labeled as such in the | | | |
| DEPOSIT OF and/or INFORMATION about the deposit attached Examiner's comment regarding REQUIREMENT I | | | |
| | | | |
| Attachment(s) 1. ☐ Notice of References Cited (PTO-892) 2. ☐ Notice of Draftperson's Patent Drawing Review (PTO-948) 3. ☑ Information Disclosure Statements (PTO-1449 or PTO/SB/0 Paper No./Mail Date 12152005 4. ☐ Examiner's Comment Regarding Requirement for Deposit of Biological Material | 6. ☐ Interview Summary Paper No./Mail Dat 8), 7. ☐ Examiner's Amendr | nent/Comment ent of Reasons for Allowance Robert A. Wax Primary Examiner | |
| ot Biological Material | 9. 🗆 Other | | |